

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

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U.S. APPLICATION NO. 10/522149		INTERNATIONAL APPLICATION NO. PCT/US03/22589		ATTORNEY'S DOCKET NUMBER 3900-0207PUS2	
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21. The following fees are submitted:				Applicant Use	Office Use Only
<input checked="" type="checkbox"/>	a) Basic national fee	\$300.00		\$ 300.00	
<input checked="" type="checkbox"/>	b) Examination fee	\$200.00		\$ 200.00	
<input checked="" type="checkbox"/>	c) Search fee	\$500.00		\$ 500.00	
TOTAL OF ABOVE CALCULATIONS =				\$ 1,000.00	
<input type="checkbox"/> Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$250 for each additional 50 sheets of paper or fraction thereof.					
Total Sheets	Extra sheets	Number of each additional 50 or fraction thereof (round up to a whole number)	RATE		
29 - 100 =	/50 =		x \$250.00		
Surcharge of \$130.00 for furnishing the oath or declaration later than 30 months from the earliest claimed priority date (37 CFR 1.492 (e)).				\$ 130.00	
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE		
Total claims	83 - 20 =	63	x 50.00	\$ 3,150.00	
Independent claims	7 - 3 =	4	x 200.00	\$ 800.00	
MULTIPLE DEPENDENT CLAIM(s) (if applicable)			+	360.00	
TOTAL OF ABOVE CALCULATIONS =				\$ 5,440.00	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2.					
SUBTOTAL =				\$ 2,720.00	
Processing fee of \$130.00 for furnishing the English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492 (f)).				\$	
TOTAL NATIONAL FEE =				\$ 2,720.00	
Fee for recording the enclosed assignment (37 CFR 1.21 (h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property				\$ 0.00	
TOTAL FEES ENCLOSED =				\$ 2,720.00	
Amount to be refunded:					\$
Amount to be charged:					\$

a. ☒ A check in the amount of \$ 2,720.00 to cover the above fees is enclosed.

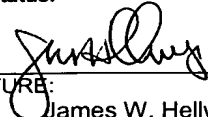
b. ☐ Please charge my Deposit Account No. _____ in the amount of \$ _____ to cover the above fees. A duplicate copy of this sheet is enclosed.

c. ☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 02-2448. A duplicate copy of this sheet is enclosed.

d. ☐ Fees are to be charged to a credit card. **WARNING:** Information on this form may become public. **Credit card information should not be included on this form.** Provide credit card information and authorization on PTO-2038.

NOTE: Where an appropriate time limit under 37 CFR 1.495 has not been met, a petition to revive (37 CFR 1.137 (a) or (b)) must be filed and granted to restore the International Application to pending status.

SEND ALL CORRESPONDENCE TO:


 SIGNATURE: _____
 NAME: James W. Hellwege

CUSTOMER NUMBER: 02292
 January 24, 2005
 JWH/nl

28,808
 REGISTRATION NUMBER